							ED 2019MAY22 pm3	
Fill in this information	on to identify	the case:					LERK, US COURT, IN	B ****
United States Bankrup	otcy Court fo	r the:						
Northern District o	f Indiana							
Case number (it known)				Chapter 7				
						ļ	Check if this amended fili	
						······································	amonada jii.	··9
Official Form	205							
Involuntary		ion Againe	st a Noi	n-Individ	ual			12/15
Use this form to begin against a non-individ	n a bankrup ual, use the	tcy case against a n	on-individual y Against en ind	ou allege to be a	debtor	05). Be as comple	oluntary case. If you v te and accurate as po and case number (If k	vant to begin a case
		f the Bankruptcy Co	de Under Whi	ch Petition is File	d.			
 Chapter of the Baccode 	ankruptcy	Check one:						
		☐ Chapter						
Part 2: Identify the	Debtor	Chapter	11					
2. Debtor's name		t Lifestyles Sport f	Resort, LLC		laid Extension for the	T STEER TO THE BOTH THE THE STEER OF THE STEER		
3. Other names you	osepota nte de la planata de la cont e				-			
know the debtor has used in the la		skingsates i k omet i ngia mati (pames manisami sa mmenesa) pilikaka samismu nunyagan a samismu	elikate til kontrakteri sat sisse E.C. Lej til kontrak ji de til sin staret med provins ocerani sa	And which the contraction and the Europe region to the Contraction States of the Contraction Sta	Anglinian	•		
8 years	interplate in membershapet der den grape of parts		- 1.	······································		•		
Include any assumed names, trade names, or doing business as names.				•				
4. Debtor's federal I		Unknown	· · · · · · · · · · · · · · · · · · ·					
Identification Nur	nder (EIN)	EIN						
5. Debtor's address	s Princir	oal place of business	• Project of Paragon Conference	Alexandra (Santa de Carente Santa de Carente	1.3	alling address, if	different	
o. Dobio. o adaros.						2007 McCord		aga a ga Calabarga ay aga a sa
	Numbe	er Street				Number	Street	
		-				P.O. Box Valparaiso	IN	46383
	City		State	Zip Code		City	State	Zip Code
						Location of prin	cipal assets, if differe	nt from principal
	County		····			place of busines	35	
						Number Str	eet	
						City	State	Złp Code
					642536	Ony	ou.c	210 0000
6. Debtor's website	e (URL)							
7. Type of debtor	☐ Partne	ration (including Limitership (excluding LLP) type of debtor. Specifi)	npany (LLC) and I	imited L	iability Partnership	(LLP)	
8. Type of debtor's business	Check on		, –	· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·	A CONTRACTOR OF THE CONTRACTOR	

Official Form 205

De	btor <u>Catalyst Li</u>	festy	les Sport	Resort,	LLC		Case	number (it known)	
		S R C C C C C N	ingle Asset ailroad (as d tockbroker (ommodity E learing Ban	Real Esta defined in as defined roker (as k (as defir ypes of bu	(as defined in 11 U.S.C.) te (as defined in 11 U.S. 11 U.S.C. § 101(44) d in 11 U.S.C. § 101(53) defined in 11 U.S.C. § 781(3) isiness listed. ess.	C. § 101(51B N) 01(6))		
9.	To the best of your knowledge, are any bankruptcy cases pending by or against any partner or affiliate of this debtor?	□ N ■ Y	o es. Debtor	Debtor	Code lived I if a billon	Smort Door		Cololingship	
				District	Catalyst Lifestyles Northern District	Date filed	October 31,	_ Relationship Case number, if	
					of Indiana		2017	_	17-23131
							MM / DD / YYYY		
4	rt3: Report About (ise :k one:						
**************************************	Allegations	Each	bankruptcy petitioner i	case cond s eligible t be the sub	in in any other district, cerning debtor's affiliates o file this petition under oject of an involuntary ca checked:	11 U.S.C. § 3	03(b).	is pending in this o	district. Consocianimasing 2004/277 despresa restriction despendent despresa despendent despendent despendent despendent
		an UV	ne debtor is nount. fithin 120 da	generally ays before than sub	not paying its debts as t the filing of this petition, stantially all of the prope	a custodian,	other than a trustee,	, receiver, or ager	a bona fide dispute as to liability or nt appointed or authorized to take against such property, was
12.	Has there been a transfer of any claim against the debtor by or to any petitioner?	■ N □ Y	•	ll docume	nts that evidence the tra	nsfer and any	statements required	d under Bankrupto	cy Rule 1003(a).
13.	Each petitioner's	laim	Name of p	etitioner		Nature of	petitioner's claim		Amount of the claim above the value of any lien
			Tall Tree	es Capita	I, LLC	services	on account		\$40000 \$
			Tanzillo	Stassin	& Babcock p.c.	services	on account		\$ \$13,730.44 \$
			Assuran	ce Agen	cy, Ltf	unpaid i	nvoice for Insura	nce coverage	\$ \$483.80 \$
			If more or	2200 le 22	anded to list notitioners	hhe daette			\$ ' claims \$54,214.24

If more space is needed to list petitioners, attach additional sheets. Write the alleged debtor's name and the case number, if known, at top of each sheet. Following the format of this form, set out the information required in Parts 3 and 4 of the form for each statement under penalty of perjury set out in Part 4 of the form, followed by each additional petitioner's (or

Debtor Catalyst Lifestyles Sport Resort, LLC	Case number (# known)
representative's) signature, along with t	the signature of the petitioner's attorney.
at 4 Request for Relief	
	t in connection with a bankruptcy case can result in fines up to \$500,000 or
•	
ditioners request that an order for relief be entered against the debtor und rporation, attach the corporate ownership statement required by Bankrupt occeding, attach a certified copy of the order of the court granting recogni	der the chapter of 11 U.S.C. specified in this polition. If a politioning creditor is a toy Rule 1010(b). If any politioner is a foreign representative appointed in a foreign lition.
ave examined the information in this document and have a reasonable be Petitioners or Petitioners' Representative	elief that the information is true and correct. Attorneys
ame and mailing address of petitioner all Trees Capital, LLC	
lame	Printed name
308 Lake Shore Dr. N	
lumber Street	Firm name, if any
Barrington IL 60010-0000 Bity State Zip Code	Number Street
ame and mailing address of petitioner's representative, if any	City State Zip Code Email
and and maining address of perinolial s representative, if any	Contact phone
ame	·
	Bar number
Account to the second s	State IN
umber Street	
ity State Zip Code	
declare under penalty of perjury that the foregoing is true and correct.	
Executed on MM / DD / YYYY	Isl Signature of attorney
Bernard asher, Manager	Date signed
al Tall Trees Capital, LLC	MM / DD / YYYY
Ignature of petitioner or representative, including representative's title	
Petitioners or Petitioners' Representative	Attornate
, ostationo et l'adottoir l'opiositation	Attorneys
lame and mailing address of petitioner	
anzillo Stassin & Babcock p.c.	Michael Sascuch
lame	Yrinied name
/o Michael Babcock 160 Jollet Street, Suite 201	Lanzella Carrot Ragel
umber Street	Firm name it any
yer IN 48311-0000 ty State Zip Code	1160 Juliet St Ste Zell
•	Dy- 2- 46304
lame and mailing address of petitioner's representative, if any	City State Zip Code Email
	Contact phone 215 865 6262 UNDBOLLTS BLAN
lame	Bar number 15254-64
	A CONTRACTOR OF CONTRACTOR CONTRA
umber Street	State IN

I declare under penalty of perjury that the foregoing is true and correct.
Official Form 205 Involuntary Petilion Against a Non-individual

State

Zip Code

Debtor Catalyst Lifestyles Sport Resort, LLC	Case-number (# known)
May, 20, 2019 MM / DD / YYYY Is/ Tanzillo Stassin & Babcock p.c. Signature of petitioner or representative, including representative's title	Signature of attorney Date signed May 20, 2019 MM / DD / YYYY
Petitioners or Petitioners' Representative	Attorneys
Name and mailing address of petitioner Assurance Agency, Ltf	
Name	Printed name
1750 E Golf Rd Number Street Schaumburg IL 60173-0000	Firm name, if any
City State Zip Code	Number Street
Name and mailing address of petitioner's representative, if any	City State Zip Code Email Contact phone
Name	Bar number
	State IN
Number Street	
City State Zip Code	
i declare under penalty of perjury that the foregoing is true and correct. Executed on	<u>Isl</u>
MM/DD/YYYY	Signature of attorney Date signed
Isl Assurance Agency, Ltf	MM/DD/YYYY
Signature of petitioner or representative, including representative's title	

Case 19-21386-jra Doc 1 Filed 05/22/19 Page 5 of 6

Debtor Catalyst Lifestyles Sport Resort, LLC	Case number (if known)
Executed on August 7, 2018 MM / DD / YYYY /s/ Tanzillo Stassin & Babcock p.c.	IsI Signature of attorney Date signed August 7, 2018 MM / DD / YYYYY
Signature of petitioner or representative, including representative's title	
Petitioners or Petitioners' Representative	Attorneys
Name and mailing address of petitioner Assurance Agency, Ltf Name	Printed name
1750 E Golf Rd Number Street Schaumburg IL 60173-0000	Firm name, if any
City . State Zip Code	Number Street
Name and mailing address of petitioner's representative, if any	City State Zip Code Contact phone Email kc@smallbusiness1 1.com
Name	Bar number
Number Street	
City State Zip Code	
I declare under penalty of perjury that the foregoing is true and correct. Executed on August 7, 2018	s
/s/ Assurance Agency, Ltf	Signature of attorney Date signed August 7, 2018 MM / DD / YYYY
Signature of petitioner or representative, including representative's title	

Debtor Catalyst Lifestyles Sport Resort, LLC	Case number (# known)
representative's) signature, along with the	signature of the petitioner's attorney.
Part 4 Request for Relief	
WARNING Bankruptcy fraud is a serious crime. Making a false statement in imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3	connection with a bankruptcy case can result in fines up to \$500,000 or 3571.
Petitioners request that an order for relief be entered against the debtor under corporation, attach the corporate ownership statement required by Bankruptcy proceeding, attach a certified copy of the order of the court granting recognition	/ Rule 1010(b). If any petitioner is a foreign representative appointed in a foreign
I have examined the information in this document and have a reasonable belie Petitioners or Petitioners' Representative	ef that the information is true and correct. Attorneys
Name and mailing address of petitioner Tali Trees Capital, LLC	
Name	Printed name
1308 Lake Shore Dr. N Number Street	Firm name, if any
Barrington IL 60010-0000	
City State Zip Code	Number Street
Name and mailing address of petitioner's representative, if any	City State Zip Code Em Contact phone
Name	
	Bar number
Number Street	State IN
City State Zip Code	
I declare under penalty of penjury that the foregoing is true and correct. Executed on	
MM/DD/YYYY	Signature of attorney
Bernard ashu, Manager 191 Tall Trees Capital, LLC	Date signed MM / DD / YYYY
Signature of petitioner or representative, including representative's title	
Petitioners or Petitioners' Representative	Attorneys
a and the second of the control of the second of the s The second of the	g gyfalli Almadar llei Mara dese e dae allike med tropp i salt de lit y desekte y trop. Salt
Name and mailing address of petitioner Tanzillo Stassin & Babcock p.c.	사용 :
Name	Printed name
c/o Michael Babcock 1160 Joliet Street, Suite 201	
Number Street Dyer IN 46311-0000	Firm name, if any
City State Zip Code	Number Street
Name and mailing address of petitioner's representative, if any	City State Zip Code Em
	Contact phone
Name	Bar number
	State <u>IN</u>
Number Street	

Zip Code

State

I declare under penalty of perjury that the foregoing is true and correct.

Official Form 205 Involuntary Petition Against a Non-Individual